



09-13-05

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**TRANSMITTAL  
FORM***(To be used for all correspondence  
after initial filing)*

Application Number	10/758,289
Filing Date	January 15, 2004
First Named Inventor	Fabio Pellizzer
Art Unit	2818
Examiner Name	Calvin Lee
Attorney Docket No.	854163.411

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form	<input checked="" type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to TC ( <i>Appeal Notice, Brief, Reply Brief</i> )
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Declaration	<input checked="" type="checkbox"/> Other Enclosure(s) ( <i>please identify below</i> ):
<input type="checkbox"/> Information Disclosure Statement; Form PTO-1449	<input type="checkbox"/> Statement under 37 CFR 3.73(b)	<u>Copy of Notice of Allowance</u>
<input type="checkbox"/> Cited References	<input type="checkbox"/> Terminal Disclaimer	_____
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	_____
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> CD, Number of CD(s) _____	_____
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	_____

**Remarks:**

6 Sheets of Replacement Drawings (Figs. 1-12)

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Seed Intellectual Property Law Group PLLC	Customer Number	38106
Signature			
Printed Name	Hai Han, Ph.D.		
Date	September 12, 2005	Reg. No.	54,150

**CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature		
Typed or printed name		Date:

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PATENT



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Fabio Pellizzer et al.  
Application No. : 10/758,289  
Filed : January 15, 2004  
For : PROCESS FOR MANUFACTURING A MEMORY DEVICE, IN  
PARTICULAR A PHASE CHANGE MEMORY, INCLUDING A  
SILICIDATION STEP

Examiner : Calvin Lee  
Art Unit : 2818  
Date of Notice  
of Allowance : July 14, 2005  
Docket No. : 854163.411  
Date : September 12, 2005

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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT AFTER ALLOWANCE

(UNDER 37 CFR 1.312)

Commissioner for Patents:

In response to the Examiner's request in the Notice of Allowance dated July 14, 2005, please amend the application as follows:

**Amendments to the Drawings** begin on page 2 of this paper and include an attached Replacement Sheet.

**Remarks/Arguments** begin on page 3 of this paper.